

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4) Summary Shee

Sum	mary	She	et
F	LE NUM	BER	

IS THIS AN AMENDMENT?

Yes

TAMMY BAITZ CLERK TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMA	TION		
1. Full Name of Committee (as on Statement of Organization)	a new name		
MATER FIX Clown			
2. Acronym or Abbreviated Name (if any)	3. Coi	mmittee Telephone Number	
	(31	17 733-623	79
4. Mailing Address (address where all campaign finance correspondence is received)	Check if the	nis is a new address	
13312 SEDGWICK LANE			
5. City, State, ZIP Code		ty Affiliation (if applicable)	
CAMOL, IN 46004		epusicus	
CANDIDATE INFORMATION (For Candida	CONTRACTOR CONTRACTOR		
7. Full Name of Candidate (include any nickname)	8. Par	ty Affiliation or If Independe	nt Candidate
KONALO E. CANTON		DUBLICION _	
9. Office Sought (Include district number, if any. Not required for exploratory committee		ounty of Residence	
CAMMOR CHY COURIL AT-LARGE	<i>\\/</i>	MILTON	na na kana na
TYPE OF REPORT		SECTION 2011 (1991) 11 11 11 11 11 11 11 11 11 11 11 11 1	ON CANDIDATES ONLY
11. Check one:  Pre-Primary Pre-Election Annual Nomination Other		Check one:	
		Pre-Con	
Final/Disbands Committee (lines 18, 19, and 20 must be '0') Outgoing Treasurer (within 10 days amend Sta	ntement of Organizati	on) Post-Co	nvention
12. Reporting Period: From: 4/11/15 Through: 10/9/15		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		16,639,29	
14. Cash on hand and investments January 1, current year.			14,305.16
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions	:.)		
15a. Itemized (use Schedule A)		29,820.56	39,300.56
15b. Unitemized		1,141.50	1,189.25
	SUBTOTAL	30,962.06	40,489.81
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	147,601.35	54,794,97
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	<del></del>	34,299.13	41,349.75
17b. Unitemized		236.30	359,30
17c. Add lines 17a and 17b in both columns	SUBTOTAL	34.535.43	41,729.05
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns	s) TOTAL	13.065.92	13.065.92
19. Debts OWED BY the committee (use Schedule D)		12, LoLe 1. 55/100	
20. Debts OWED TO the committee (use Schedule E)		0.00 z	

RIFICATION	FOR OFFICE USE ONLY
T OF MY KNOWLEDGE AND BE	EF IT IS TRUE, CORRECT AND COMPLETE.
Title.	Date / STURY STUDY
Theyour	4/12/15
	Date
	10/16/2015
	purpose. (IC 3-9-4-5) A person who knowingly
berson who fails to file a complet	or accurate report as required by the Indiana

and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

Page			of		
	F	ILE NU	IMBER	0-07-01-0 3-04-01-0	

	ing   Nagara kanga mili at mili at mili ang gapangan at ak ka at manang kalika kanang mili at kanang kanang ka		Talk to the State of Marie Marie The State of the State o	
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT		COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)	UR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
BUBBY LOUNAND ENTERPRISES	Direct		•	
1241 HILLCREST Dp.	In-Kind (describe)			4/1/pois
1211/11/2010/11	01	1500,00	1510,00	///
CAMMEL, IN 46033	Other Receipts:  Interest Loan			
	Misc. (specify)			554
Contributor's Occupation (if required)				
2.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
		_		
	Other Receipts:			
	Interest Loan Misc. (specify)			
	Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			ĺ
	In-Kind (describe)			
	Other Receipts:			
	│			
	Misc. (specify)			
Contributor's Occupation (if required)			; 	
4.	Contributions:			
	☐ Direct☐ In-Kind (describe)			
	in-Mad (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	☐ Direct			
	In-Kind (describe)			
	Other Desciptor			
	Other Receipts:  Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A		\$ 500,00		
	15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200), if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page	of			

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Metropolitan Indpls Board of Realtors 1912 N Meridian St Indianapolis, IN 46202	Contributions:  Direct In-Kind (describe)	\$500.00	\$500.00	4/10/205
	Other Receipts:  Interest Loan  Misc. (specify)	ψοσο.σσ	ψοσο.σσ	SJL
Carmel Professional Firefighters Local 4444     Civic Square     Carmel, IN 46032	Contributions;  Direct In-Kind (describe)	\$500.00	\$1,000,00	4/17/2015
	Other Receipts:  Interest Loan  Misc. (specify)	ψοσο.σσ	00   \$1,000.00	SJL
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)		Control of the contro	
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)	i i		
i	. THIS PAGE OF SCHEDULE A	\$ 1,000.00	-	
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on IT)	A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular native committee).

Fl	LE NUMBER
Page	of

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
FRIEVOS OF J. in BRAINARD P.O. Best 4024 CARNICE, IN 46082	Contributions: Direct In-Kind (describe) Communication Other Receipts: Interest Loan Misc. (specify)	J28,32.0.56		5/05/2016
2.	Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
TOTAL OF ALL PAGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$28,320.56 \$28,320,56		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
Page _	of			

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATEO
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
International Entertainment Bureau 3612 N Washington Blvd Indpls, IN 46205	aerial signs  City Council At Large	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$500.00	\$500.00	4/16/2015
Code A  Amphtober 617 Carson Ct	photographer	advertising  Direct in-Kind Payment of Debt Returned Contribution	\$200.00	\$700.00	4/19/2015
Carmel, IN 46033	City Council At Large	Purpose: advertising			
Code_F  A Cut Above	caterer	Direct In-Kind Payment of Debt Returned Contribution	\$186.50	\$886.50	4/21/2015
12955 Old Meridian St Suite 104 Carmel, IN 46032	City Council At Large	Purpose:	φ100.50	φοσο.50	172 1720 10
Carmel, IN 46032  Hamilton County Republican Party 7246 Fishers Crossing Dr Fishers, IN 46038	republican party	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	\$1,000.00	\$1,886.50	4/22/2015
	City Council At Large	Purpose: donaiton	Ψ1,000.00	ψ 1,000.00	712212010
Code A  Jennifer Bradley Design	graphic design	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	\$27E 00	¢2 264 50	5/1/2015
9490 Greenthred Drive Zionsville, IN 46077	City Council At large	Other Purpose: postcards	\$375.00	\$2,261.50	3/1/2013
T & T Sales 15320 Herriman Blvd Noblesville, IN 46060	promotions	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	<b>#</b> 500.70	<b>#0.700.00</b>	EMIODAE
	City Council At Large	OtherPurpose: t-shirts	\$500.76	\$2,762.26	5/1/2015
Artists Development Company PO Box 4101 Carmel, IN 46082	website	Direct In-Kind Payment of Debt Returned Contribution	\$724.80	\$724.80	5/18/2015
	City Council At Large	Other Purpose: Website		7.2	3
	SUBTOTAL THIS PA		\$3,487.06		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)					



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER			
Page	of		

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION  OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Current Publishing 30 S Range Line Rd Carmel, IN 46032	newspaper	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$803.00	\$4,290.06	6/12/2015
Cannel, IN 40032	City Council At Large	advertising			
Code A  Media Factory	brochures	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	#200 F4	Φ4 500 57	4/29/2015
481 Gradle Drive Carmel, IN 46032	City Council At Large	Other Purpose: brochures	\$302.51	\$4,592.57	4/29/2015
Code_F  Kristian Presley	caterer	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	<b>4400.00</b>	<b>4.700.57</b>	7/40/0045
1620 N Central Ave #202 Indpls, IN 46202	City Council At Large	Other Purpose:	\$108.00	\$4,700.57	7/10/2015
Code F	caterer	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			740,0045
Krisitan Presley 1620 N Central Ave #202 Indpls, IN 462002	City Council At Large	Dother Purpose: catering	\$120.00	\$4,820.57	7/12/2015
Code C  Actors Theatre of Indiana	theatrical group	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	;		
1 Center Green Carmel, IN 46032	City Council At large	Other Purpose: contribution	\$261.00	\$5,081.57	7/15/2015
Code C  Carmel Symphony Orchestra	symphony	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	475000	<b>45.004.57</b>	7/04/0045
1 Center Green Carmel, IN 46032	City Council At Large	Dother Purpose: Contribution	\$750.00	\$5,831.57	7/31/2015
Code O USPS Modical Priva	post office	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other	\$147.00	\$5,978.57	5/1/2015
Medical Drive Carmel, IN 46032	City Council At Large	Purpose: postage			
	SUBTOTAL THIS PA		\$2,491.51		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of	E LAST PAGE ON Y the Summary Sh	) }		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

, e	ILE NUMBE	iR.
Page	of	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
FRIENDS OF JTTE BRAWALD P.O. BCD FORY CARMENTER 46082		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	\$ 28,370.56		5/05/15
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	-		
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$28,370,50		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the		\$34,298,13		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, requiress of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE NUMBE	R
		-• 
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Page	of	<u> </u>

CREDITOR'S OR LENDER'S NAME	ENDORSER'S OR VENDOR'S	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
& MAILING ADDRESS (street, number, city, state, ZIP code)	NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
Ronald E. Carter 12715 Stanwich Pl.		25.00	المحادة		·
12715 Stanwill P1.		L	3/29/11		12,310.07
Carmel, 1N 40033.		loan			
LENDERS OCCUPATION CONSULTANT					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION					
			4		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					-
			•		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:		QUETO	TAL THIS PAGE	OF SCHEDULE I	\$ 25 -
	TOTAL OF A	ALL PAGES OF SCHED			<del></del>
	TOTAL OF A	ובג ראטבט טר סטחבט Fnter total ו	n ITEM 19 of th	e Summary Sheet	,



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

•	
•	
FILE NUMBER	

	"ISTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing to edule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY to edule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY to entire during the reporting period. Include all amounts owed for or to lending institutions, individual credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual make loans of at least \$1,000 during the calendar year. Otherwise, this is optional.
--	--

loans of at least \$1,000 during the caleridar you			<del>- 1</del>	•
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter		41.01	6/28/02	4101
DIV Med 1N 40033		wan		
Royald Carter 1311 Rick Rd. Carnel, IN 40033		13.63	7/30/02	54.64
LENDERS OCCUPATION:		wan		
Ronald Carter 1311 Rioge Rd. Carnel, IN 46033		100.00 Wan	32103	154.64
RONALD Carter 13:11 Rick Rd.		77.97	3/22/03	232.61
Carnel, 1740033		loan		
Rorald Carter 1311 Ride Rd.	,	1350,58	3 24103	1583.19
Carnel, 14 40033		loan		
Ronald arter 1311 Ridge Rd.		118.72	3 27 03	1701.91
Carmel, IN 40033		Wan		1
Ronald Carter 1311 Ridge Rd.		569.64	4/6/03	2271.55
Carnel IN 46033		SUB TOTA	AL THIS PAGE OF SCHEDULE	D 5 2271.55
	TOTAL OF A		E D ON THE LAST PAGE ON	<del></del>



(CFA-4 SCHEDULE D)

Debts Owed by This Committee

State Form 4606 (R8 / 8-97)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1997

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Pade	of	 

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter 1311 Ride Rd- Carnel IN033	•	191.81 Loan	4/11/03		7463.34
Carnel Muss Ronald Carter 1311 Ridge Rd- Carnel Muss LENDERS OCCUPATION: 40033	·	24.23 Wan	4/13/03		2487.59
RONAL CAPER		2227 AD	3/10/95		58 25,4°
LENDERS OCCUPATION:		1			6
LENDERS OCCUPATION:		-			
LENDERS OCCUPATION:					
LENDERS OCCUPATION:					
LENC OCCUPATION:					27:00

SUB TOTAL THIS PAGE OF SCHEDULE D

3553.44



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

·	_
to a contract of the contract	
FILE NUMBER	Ą

LUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this
assemble, and instructions on the mapped side I list all debits and loans, recorded to the amount. UNEU D.T. the
committee thing the reporting period accounts, etc. List each vendor paid by credit card issued in the credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the
name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes
loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (fary) (street, number, city, state, ZIP code)	AMOUNT	DATE DEST INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING EALANCE THIS PERIOD
Ronald Carter 1311 Rick Rd. Coursel, IN 40032		3985.33 loan	4/28/03		 9810.82
ilonald Carter		43.92 Lean	6303		9854.75
Ronald Carter		300.87	5 603		10,161.61
Royald Carter		38.19 Wan	413903	·	10,200.3
Rowald Carter		47.32 Wan	5/8/03		10,247.62
ENDERS OCCUPATIONS .				·	
ENDERS OCCUPATION					
ENDERS OCCUPATION:	1	SUB TOTA	L THIS PAGE OF	SCHEDULE D	:4422.13
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY					5-11 ···

(Enter total on ITEM 19 of the Summary Sheet)



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, required of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions; individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME  & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (ifany) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEST INCURRED	CUMULATIVE PAID YEAR-TO DATE	OUTSTAND BALANCE PERIO
Ronald Carter 12715 Stanwich Carmel IN 40033	my Campaign Stove PO BOX 594 Jeffersonville, IN 47	1.749.84 131 Wan	3/1/07		11996!
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED		OUTSTANDING BALANCE THIS PERIOD
12715 Stanwich Carnel, 1446033	OSP Printing 102 W. Carnel D Carnel, M 40032	1.\$286.20 Wan	42707		12,283.11
Ronald Carter 12715 Stanwich Carmel, 1N 46033	le Peep Carnel, M	32.86 Wan	4/20/07		12,316.1
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State Form 4608 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, OWED BY the committee during the reporting period, include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor pald by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME. & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	GUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald E Carter 12716 Stanwich Place Carmel, IN 46032		\$80.00	2/15/2015		\$80.00
LENDER'S OCCUPATION:		loan			
Ronald E Carter 12715 Stanwich Place		\$34.93	1/20/2015		\$34.93
Carmel, IN 46032	·	loan			
Ronald E Carter 12715 Stanwich Place		\$85.59	2/9/2015		\$85.59
Carmel, IN 46032	·	loan			
LENDER'S OCCUPATION:					
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

## (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS <i>(if any)</i>	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
Ronald E Carter 12715 Stanwich Place Carmet, IN 46033		\$120.00	10/2/2015		\$120.00
LENDER'S OCCUPATION:		loan	10,2,20		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
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TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY

(Enter total on ITEM 19 of the Summary Sheet)